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8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

11 In the Matter of the Accusation and Petition to
Revoke Probation Against:

Case No. 800-2023-096563

12 **HARRY BERNARD KRAM, M.D.**
13 **3445 Pacific Coast Highway, #230**
Torrance, CA 90505-6660

DEFAULT DECISION
AND ORDER

14 **Physician's and Surgeon's Certificate**
15 **No. G 52608,**

[Gov. Code, §11520]

16 Respondent.

17
18 **FINDINGS OF FACT**

19 1. On or about September 18, 2025, Complainant Reji Varghese, in his official capacity
20 as the Executive Director of the Medical Board of California, Department of Consumer Affairs
21 (Board), filed Accusation and Petition to Revoke Probation No. 800-2023-096563 against Harry
22 Bernard Kram, M.D. (Respondent) before the Medical Board of California.

23 2. On or about June 25, 1984, the Board issued Physician's and Surgeon's Certificate
24 No. G 52608 to Respondent. The Physician's and Surgeon's Certificate expired on June 30, 2024,
25 and has not been renewed. A copy of the Certificate of Licensure is attached as **Exhibit A to the**
26 **accompanying Evidence Packet.**

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1 3. Business and Professions Code section 118 states, in pertinent part:

2 (b) The suspension, expiration, or forfeiture by operation of law of a license
3 issued by a board in the department, or its suspension, forfeiture, or cancellation by
4 order of the board or by order of a court of law, or its surrender without the written
5 consent of the board, shall not, during any period in which it may be renewed,
6 restored, reissued, or reinstated, deprive the board of its authority to institute or
7 continue a disciplinary proceeding against the licensee upon any ground provided by
8 law or to enter an order suspending or revoking the license or otherwise taking
9 disciplinary action against the license on any such ground.

10 4. On or about September 18, 2025, Merlene Francis, an employee of the Complainant
11 Agency, served by Certified and First Class Mail a copy of Accusation and Petition to Revoke
12 Probation No. 800-2023-096563, Statement to Respondent; Notice of Defense; and Request for
13 Discovery to Respondent's address of record with the Board, which was and is 3445 Pacific Coast
14 Highway, #230, Torrance, California 90505. A copy of the Accusation and Petition to Revoke
15 Probation, the related documents, and Declaration of Service are attached as **Exhibit B to the**
16 **accompanying Evidence Packet** and are incorporated herein by reference.

17 5. Service of the Petition to Revoke Probation was effective as a matter of law under the
18 provisions of Government Code section 11505, subdivision (c).

19 6. On or about November 3, 2025, the aforementioned documents were returned by the
20 U.S. Postal Service (USPS) marked "Return to Sender. Unable to Forward." A copy of the
21 envelope returned by the post office is attached as **Exhibit C to the accompanying Evidence**
22 **Packet**, and is incorporated herein by reference.

23 7. Government Code section 11506 states, in pertinent part:

24 (c) The respondent shall be entitled to a hearing on the merits if the respondent
25 files a notice of defense, and the notice shall be deemed a specific denial of all parts
26 of the accusation not expressly admitted. Failure to file a notice of defense shall
27 constitute a waiver of respondent's right to a hearing, but the agency in its discretion
28 may nevertheless grant a hearing.

 8. Respondent failed to file a Notice of Defense within 15 days after service upon him
of the Accusation and Petition to Revoke Probation, and therefore waived his right to a hearing on
the merits of Accusation and Petition to Revoke Probation No. 800-2023-096563.

 9. On or about October 3, 2025, Respondent was served a Courtesy Notice of Default to
his address of record and his last known home address by first class mail with the United States

1 Postal Service. That same date, the Courtesy Notice of Default was also served electronically to
2 Respondent's last known e-mail address. The Courtesy Notice of Default included a copy of the
3 Accusation and Petition to Revoke Probation and Notice of Defense previously served on
4 Respondent, advising him that if he failed to take action to file a Notice of Defense within 14
5 calendar days (by October 17, 2025), the Board would enter a Default Decision against his
6 license, which may be revoked without a hearing. (See **Exhibit D to the accompanying**
7 **Evidence Packet.**)

8 10. Despite being served with the Accusation and Petition to Revoke Probation, and
9 related documents, to his address of record, and being served with a Courtesy Notice of Default
10 that enclosed the Accusation and Petition to Revoke Probation and Notice of Defense form,
11 Respondent failed to file a Notice of Defense or give any notice to Complainant of his intent to
12 contest the Accusation and Petition to Revoke Probation. **Exhibit E to the accompanying**
13 **Evidence Packet** is a declaration stating that no Notice of Defense has been received or
14 submitted.

15 11. **Exhibit F to the accompanying Evidence Packet** contains a Declaration from
16 expert Tye Ouzounian, M.D. declaring that it is unprofessional conduct and conduct which
17 breaches the rules or ethical code of the medical profession for a physician to physically assault
18 another person and that Respondent's assault on Ms. T.R. is unprofessional conduct.

19 12. **Exhibit G to the accompanying Evidence Packet** contains the curriculum vitae of
20 expert Tye Ouzounian, M.D., with his personal information redacted.

21 13. **Exhibit H to the accompanying Evidence Packet** contains the expert report of Tye
22 Ouzounian, M.D. dated February 22, 2025.

23 14. **Exhibit I to the accompanying Evidence Packet** contains a Declaration from the
24 Probation Inspector declaring that Respondent violated his probation and remains in non-
25 compliance with his probation.

26 15. Business and Professions Code section 125.3 states, in pertinent part:

27 (a) Except as otherwise provided by law, in any order issued in resolution of a
28 disciplinary proceeding before any board within the department or before the
osteopathic Medical Board, upon request of the entity bringing the proceeding, the

1 administrative law judge may direct a licensee found to have committed a violation or
2 violations of the licensing act to pay a sum not to exceed the reasonable costs of the
investigation and enforcement of the case.

3 16. The reasonable costs for the investigation and enforcement of Accusation and Petition
4 to Revoke Probation No. 800-2023-096563 are \$22,201.00. Respondent owes the Board
5 outstanding probation costs owed in the amount \$28,063.90. The certifications of costs for
6 Accusation and Petition to Revoke Probation No. 800-2023-096563 are attached as **Exhibits J-1,**
7 **J-2 and J-3** to the "Evidence Packet" and are incorporated herein by reference. The certification
8 of outstanding probation costs is attached as **Exhibit J-4** to the "Evidence Packet" and is
9 incorporated herein by reference.

10 17. California Government Code section 11520 states, in pertinent part:

11 (a) If the respondent either fails to file a notice of defense or to appear at the
12 hearing, the agency may take action based upon the respondent's express admissions
13 or upon other evidence and affidavits may be used as evidence without any notice to
respondent.

14 18. Pursuant to its authority under Government Code section 11520, the Board finds
15 Respondent is in default. The Board will take action without further hearing and, based on
16 Respondent's express admissions by way of default and the evidence before it, contained in
17 Exhibits A through J, finds that the allegations in Accusation and Petition to Revoke Probation
18 No. 800-2023-096563 are true.

19 **DETERMINATION OF ISSUES**

20 1. Based on the foregoing findings of fact, Respondent Harry Bernard Kram, M.D. has
21 subjected his Physician's and Surgeon's Certificate No. G 52608 to discipline.

22 2. A copy of the Accusation and Petition to Revoke Probation and the related documents
23 and Declaration of Service are attached here as Exhibit B.

24 3. The Board has jurisdiction to adjudicate this case by default.

25 4. The Medical Board of California is authorized to revoke Respondent's Physician's and
26 Surgeon's Certificate based upon the following violations alleged in the Accusation and Petition
27 to Revoke Probation:

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- a. Unprofessional conduct: Respondent engaged in conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming to a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine pursuant to Business and Professions Code sections 2234, subdivision (a), and California Code of Regulations, Title 16, section 1360.
- b. Failure to comply with Probation Condition 2, Medical Record Keeping Course;
- c. Failure to comply with Probation Condition 3, Practice Monitor;
- d. Failure to comply with Probation Condition 4, Notification;
- e. Failure to comply with Probation Condition 7, Investigation/Enforcement Cost Recovery;
- f. Failure to comply with Probation Condition 9, General Probation Requirements;
- g. Failure to comply with Probation Condition 10, Interview with the Board or its Designee; and
- h. Failure to comply with Probation Condition 13, Violation of Probation.

5. The violation set forth above in paragraph 4, subdivision (a) is supported by the Declaration of Tye Ouzounian, M.D. (see **Exhibit F.**)

6. The violations set forth above in paragraph 4, subdivisions (b) through (h) are supported by the Declaration of Rachel Asendorf, Probation Inspector II (see **Exhibit I.**)

7. Pursuant to Code section 125.3, the Board is authorized to order Respondent to pay the Board the reasonable costs of investigation and enforcement of Accusation and Petition to Revoke Probation No. 800-2023-096563 totaling \$22,201.00. (See **Exhibits J-1, J-2, and J-3.**)

8. Pursuant to Probation Condition 7 of the Decision, Respondent owes \$13,600.00 in outstanding investigation/enforcement cost recovery to the Board, and pursuant to Probation Condition 15, Respondent owes \$14,463.90 in outstanding probation monitoring costs to the Board, totaling \$28,063.90 (See **Exhibit J-4.**)

ORDER

IT IS SO ORDERED that Physician's and Surgeon's Certificate No. G 52608, heretofore issued to Respondent Harry Bernard Kram, M.D., is revoked.

Respondent is ordered to pay the Board the costs of the investigation and enforcement of Accusation and Petition to Revoke Probation No. 800-2023-096563 in the amount of \$22,201.00. Further, Respondent is ordered to reimburse the Board the amount of \$28,063.90, for its outstanding probation costs. The filing of bankruptcy by Respondent shall not relieve Respondent of his responsibility to reimburse the Board for its costs. Respondent must pay the entire amount of costs prior to petitioning for reinstatement.

If Respondent ever files an application for re-licensure or reinstatement in the State of California, the Board shall treat it as a petition for reinstatement. Respondent must comply with all the laws, regulations and procedures for reinstatement of a revoked license in effect at the time the petition is filed.

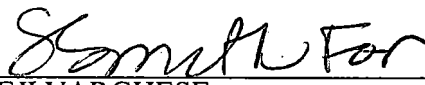
Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The Board in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

This Decision shall become effective at 5:00 p.m. on _____.

DEC 23 2025

It is so ORDERED _____

DEC 11 2025


REJI VARGHESE
EXECUTIVE DIRECTOR
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

LA2025602433

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11 In the Matter of the Accusation and Petition to
Revoke Probation Against:

Case No. 800-2023-096563

12 **HARRY BERNARD KRAM, M.D.**
13 **3445 Pacific Coast Highway, #230**
Torrance, CA 90505-6660

**ACCUSATION AND PETITION TO
REVOKE PROBATION**

14 **Physician's and Surgeon's Certificate**
15 **No. G 52608,**

16 Respondent.

17
18 Complainant alleges:

19 **PARTIES**

20 1. Reji Varghese (Complainant) brings this Accusation and Petition to Revoke Probation
21 solely in his official capacity as the Executive Director of the Medical Board of California,
22 Department of Consumer Affairs (Board).

23 2. On or about June 25, 1984, the Board issued Physician's and Surgeon's Certificate
24 Number G 52608 to Harry Bernard Kram, M.D. (Respondent). That license was in effect at all
25 times relevant to the charges brought herein and expired on June 30, 2024.

26 3. In a disciplinary action titled *In the Matter of the First Amended Accusation Against*
27 *Harry Bernard Kram, M.D.*, Case No. 800-2020-069845, the Board, issued a Decision, effective
28 October 12, 2023, in which Respondent's Physician's and Surgeon's Certificate was revoked.

1 However, the revocation was stayed, and Respondent's Physician's and Surgeon's Certificate was
2 placed on probation for a period of three (3) years with certain terms and conditions. A copy of
3 that Decision is attached as Exhibit A and is incorporated by reference.

4 JURISDICTION

5 4. This Accusation and Petition to Revoke Probation is brought before the Board, under
6 the authority of the following laws. All section references are to the Business and Professions
7 Code unless otherwise indicated.

8 5. Section 118 of the Code states:

9 (a) The withdrawal of an application for a license after it has been filed with a
10 board in the department shall not, unless the board has consented in writing to such
11 withdrawal, deprive the board of its authority to institute or continue a proceeding
against the applicant for the denial of the license upon any ground provided by law or
to enter an order denying the license upon any such ground.

12 (b) The suspension, expiration, or forfeiture by operation of law of a license
13 issued by a board in the department, or its suspension, forfeiture, or cancellation by
14 order of the board or by order of a court of law, or its surrender without the written
consent of the board, shall not, during any period in which it may be renewed,
restored, reissued, or reinstated, deprive the board of its authority to institute or
15 continue a disciplinary proceeding against the licensee upon any ground provided by
law or to enter an order suspending or revoking the license or otherwise taking
16 disciplinary action against the licensee on any such ground.

17 (c) As used in this section, "board" includes an individual who is authorized by
any provision of this code to issue, suspend, or revoke a license, and "license"
18 includes "certificate," "registration," and "permit."

19 6. Section 2227 of the Code states:

20 (a) A licensee whose matter has been heard by an administrative law judge of
21 the Medical Quality Hearing Panel as designated in Section 11371 of the Government
Code, or whose default has been entered, and who is found guilty, or who has entered
22 into a stipulation for disciplinary action with the board, may, in accordance with the
provisions of this chapter:

23 (1) Have his or her license revoked upon order of the board.

24 (2) Have his or her right to practice suspended for a period not to exceed one
25 year upon order of the board.

26 (3) Be placed on probation and be required to pay the costs of probation
monitoring upon order of the board.

27 (4) Be publicly reprimanded by the board. The public reprimand may include a
28 requirement that the licensee complete relevant educational courses approved by the
board.

1
2 (5) Have any other action taken in relation to discipline as part of an order of
probation, as the board or an administrative law judge may deem proper.

3 (b) Any matter heard pursuant to subdivision (a), except for warning letters,
4 medical review or advisory conferences, professional competency examinations,
5 continuing education activities, and cost reimbursement associated therewith that are
6 agreed to with the board and successfully completed by the licensee, or other matters
made confidential or privileged by existing law, is deemed public, and shall be made
available to the public by the board pursuant to Section 803.1.

7 STATUTORY PROVISIONS

8 7. Section 2234 of the Code states:

9 The board shall take action against any licensee who is charged with
10 unprofessional conduct. In addition to other provisions of this article, unprofessional
conduct includes, but is not limited to, the following:

11 (a) Violating or attempting to violate, directly or indirectly, assisting in or
12 abetting the violation of, or conspiring to violate any provision of this chapter.

13 (b) Gross negligence.

14 (c) Repeated negligent acts. To be repeated, there must be two or more
15 negligent acts or omissions. An initial negligent act or omission followed by a
separate and distinct departure from the applicable standard of care shall constitute
repeated negligent acts.

16 (1) An initial negligent diagnosis followed by an act or omission medically
17 appropriate for that negligent diagnosis of the patient shall constitute a single
negligent act.

18 (2) When the standard of care requires a change in the diagnosis, act, or
19 omission that constitutes the negligent act described in paragraph (1), including, but
20 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
licensee's conduct departs from the applicable standard of care, each departure
constitutes a separate and distinct breach of the standard of care.

21 (d) Incompetence.

22 (e) The commission of any act involving dishonesty or corruption that is
23 substantially related to the qualifications, functions, or duties of a physician and
surgeon.

24 (f) Any action or conduct that would have warranted the denial of a certificate.

25 (g) The failure by a certificate holder, in the absence of good cause, to attend
26 and participate in an interview by the board no later than 30 calendar days after being
27 notified by the board. This subdivision shall only apply to a certificate holder who is
the subject of an investigation by the board.

28 (h) Any action of the licensee, or another person acting on behalf of the
licensee, intended to cause their patient or their patient's authorized representative to

1 rescind consent to release the patient's medical records to the board or the
2 Department of Consumer Affairs, Health Quality Investigation Unit.

3 (i) Dissuading, intimidating, or tampering with a patient, witness, or any person
4 in an attempt to prevent them from reporting or testifying about a licensee.

5 8. Unprofessional conduct under Business and Professions Code section 2234 is conduct
6 which breaches the rules or ethical code of the medical profession or conduct which is
7 unbecoming a member in good standing of the medical profession, and which demonstrates an
8 unfitness to practice medicine. (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564,
9 575.)

10 PROBATION CONDITIONS

11 9. In a prior disciplinary action titled *In the Matter of the First Amended Accusation*
12 *Against Harry Bernard Kram, M.D.*, Case No. 800-2020-069845, an Accusation was filed against
13 Respondent on January 25, 2022. The First Amended Accusation was filed against Respondent
14 on June 9, 2022, and alleged that between 2017 and 2019 Respondent was grossly negligent in his
15 care of one patient (Patient 1) and committed repeated negligent acts, incompetence, and general
16 unprofessional conduct, and failed to maintain adequate and accurate medical records, regarding
17 his care and treatment of two patients (Patients 1 and 2). In a Decision and Order that became
18 effective on October 12, 2023, Respondent's license was revoked, with the revocation stayed and
19 the imposition of three years of probation with multiple terms and conditions of probation.

20 10. At all times after the effective date of Respondent's probation as ordered in the
21 Decision in Case No. 800-2020-069845, Probation Condition 2 stated:

22 MEDICAL RECORD KEEPING COURSE. Within sixty (60) calendar days of
23 the effective date of this Decision, Respondent shall enroll in a course in medical
24 record keeping approved in advance by the Board or its designee. Respondent shall
25 provide the approved course provider with any information and documents that the
26 approved course provider may deem pertinent. Respondent shall participate in and
27 successfully complete the classroom component of the course not later than six (6)
28 months after Respondent's initial enrollment. Respondent shall successfully
complete any other component of the course within one (1) year of enrollment. The
medical record keeping course shall be at Respondent's expense and shall be in
addition to the Continuing Medical Education (CME) requirements for renewal of
licensure.

A medical record keeping course taken after the acts that gave rise to the
charges in the Accusation, but prior to the effective date of the Decision may, in the

1 sole discretion of the Board or its designee, be accepted towards the fulfillment of this
2 condition if the course would have been approved by the Board or its designee had
the course been taken after the effective date of this Decision.

3 Respondent shall submit a certification of successful completion to the Board or
4 its designee not later than fifteen (15) calendar days after successfully completing the
5 course, or not later than fifteen (15) calendar days after the effective date of the
Decision, whichever is later.

6 11. At all times after the effective date of Respondent's probation as ordered in the
7 Decision in Case No. 800-2020-069845, Probation Condition 3 stated:

8 MONITORING - PRACTICE. Within thirty (30) calendar days of the effective
9 date of this Decision, Respondent shall submit to the Board or its designee for prior
10 approval as a practice monitor, the name and qualifications of one or more licensed
11 physicians and surgeons whose licenses are valid and in good standing, and who are
12 preferably American Board of Medical Specialties (ABMS) certified. A monitor
13 shall have no prior or current business or personal relationship with Respondent, or
14 other relationship that could reasonably be expected to compromise the ability of the
monitor to render fair and unbiased reports to the Board, including but not limited to
any form of bartering, shall be in Respondent's field of practice, and must agree to
serve as Respondent's monitor. Respondent shall pay all monitoring costs.

15 The Board or its designee shall provide the approved monitor with copies of the
16 Decision(s) and Accusation(s), and a proposed monitoring plan. Within fifteen (15)
17 calendar days of receipt of the Decision(s), Accusation(s), and proposed monitoring
18 plan, the monitor shall submit a signed statement that the monitor has read the
19 Decision(s) and Accusation(s), fully understands the role of a monitor, and agrees or
disagrees with the proposed monitoring plan. If the monitor disagrees with the
proposed monitoring plan, the monitor shall submit a revised monitoring plan with
the signed statement for approval by the Board or its designee.

20 Within sixty (60) calendar days of the effective date of this Decision, and
21 continuing throughout probation, Respondent's practice shall be monitored by the
22 approved monitor. Respondent shall make all records available for immediate
inspection and copying on the premises by the monitor at all times during business
hours and shall retain the records for the entire term of probation.

23 If Respondent fails to obtain approval of a monitor within sixty (60) calendar
24 days of the effective date of this Decision, Respondent shall receive a notification
25 from the Board or its designee to cease the practice of medicine within three (3)
26 calendar days after being so notified. Respondent shall cease the practice of medicine
until a monitor is approved to provide monitoring responsibility.

27 The monitor shall submit a quarterly written report to the Board or its designee
28 which includes an evaluation of Respondent's performance, indicating whether
Respondent's practices are within the standards of practice of medicine, and whether

1 Respondent is practicing medicine safely, billing appropriately or both. It shall be the
2 sole responsibility of Respondent to ensure that the monitor submits the quarterly
3 written reports to the Board or its designee within ten (10) calendar days after the end
4 of the preceding quarter.

5 If the monitor resigns or is no longer available, Respondent shall, within five
6 (5) calendar days of such resignation or unavailability, submit to the Board or its
7 designee, for prior approval, the name and qualifications of a replacement monitor
8 who will be assuming that responsibility within fifteen (15) calendar days. If
9 Respondent fails to obtain approval of a replacement monitor within sixty (60)
10 calendar days of the resignation or unavailability of the monitor, Respondent shall
11 receive a notification from the Board or its designee to cease the practice of medicine
12 within three (3) calendar days after being so notified. Respondent shall cease the
13 practice of medicine until a replacement monitor is approved and assumes monitoring
14 responsibility.

15 12. At all times after the effective date of Respondent's probation as ordered in the
16 Decision in Case No. 800-2020-069845, Probation Condition 4 stated:

17 NOTIFICATION. Within seven (7) days of the effective date of this Decision,
18 Respondent shall provide a true copy of this Decision and First Amended Accusation
19 to the Chief of Staff or the Chief Executive Officer at every hospital where privileges
20 or membership are extended to Respondent, at any other facility where Respondent
21 engages in the practice of medicine, including all physician and locum tenens
22 registries or other similar agencies, and to the Chief Executive Officer at every
23 insurance carrier which extends malpractice insurance coverage to Respondent.
24 Respondent shall submit proof of compliance to the Board or its designee within
25 fifteen (15) calendar days.

26 This condition shall apply to any change(s) in hospitals, other facilities or
27 insurance carrier.

28 13. At all times after the effective date of Respondent's probation as ordered in the
Decision in Case No. 800-2020-069845, Probation Condition 7 stated:

INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is
hereby ordered to reimburse the Board its costs of investigation and enforcement, in
the amount of \$13,600.00 (thirteen thousand six hundred dollars and no cents). Costs
shall be payable to the Medical Board of California. Failure to pay such costs shall
be considered a violation of probation.

Payment must be made in full within thirty (30) calendar days of the effective
date of the Order, or by a payment plan approved by the Medical Board of California.
Any and all requests for a payment plan shall be submitted in writing by Respondent
to the Board. Failure to comply with the payment plan shall be considered a violation
of probation.

1 The filing of bankruptcy by Respondent shall not relieve Respondent of the
2 responsibility to repay investigation and enforcement costs.

3 14. At all times after the effective date of Respondent's probation as ordered in the
4 Decision in Case No. 800-2020-069845, Probation Condition 9 stated:

5 GENERAL PROBATION REQUIREMENTS.

6 Compliance with Probation Unit

7 Respondent shall comply with the Board's probation unit.

8 Address Changes

9 Respondent shall, at all times, keep the Board informed of Respondent's
10 business and residence addresses, email address (if available), and telephone number.
11 Changes of such addresses shall be immediately communicated in writing to the
12 Board or its designee. Under no circumstances shall a post office box serve as an
13 address of record, except as allowed by Business and Professions Code section 2021,
14 subdivision (b).

15 Place of Practice

16 Respondent shall not engage in the practice of medicine in Respondent's or
17 patient's place of residence, unless the patient resides in a skilled nursing facility or
18 other similar licensed facility.

19 License Renewal

20 Respondent shall maintain a current and renewed California physician's and
21 surgeon's license.

22 Travel or Residence Outside California

23 Respondent shall immediately inform the Board or its designee, in writing, of
24 travel to any areas outside the jurisdiction of California which lasts, or is
25 contemplated to last, more than thirty (30) calendar days.

26 In the event Respondent should leave the State of California to reside or to
27 practice Respondent shall notify the Board or its designee in writing thirty (30)
28 calendar days prior to the dates of departure and return.

15. At all times after the effective date of Respondent's probation as ordered in the
Decision in Case No. 800-2020-069845, Probation Condition 10 stated:

INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
available in person upon request for interviews either at Respondent's place of
business or at the probation unit office, with or without prior notice throughout the
term of probation.

///

1 16. At all times after the effective date of Respondent's probation as ordered in the
2 Decision in Case No. 800-2020-069845, Probation Condition 13 stated:

3 **VIOLATION OF PROBATION.** Failure to fully comply with any term or
4 condition of probation is a violation of probation. If Respondent violates probation in
5 any respect, the Board, after giving Respondent notice and the opportunity to be
6 heard, may revoke probation and carry out the disciplinary order that was stayed. If
7 an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is
8 filed against Respondent during probation, the Board shall have continuing
jurisdiction until the matter is final, and the period of probation shall be extended
until the matter is final.

8 **COST RECOVERY**

9 17. Section 125.3 of the Code states:

10 (a) Except as otherwise provided by law, in any order issued in resolution of a
11 disciplinary proceeding before any board within the department or before the
12 Osteopathic Medical Board, upon request of the entity bringing the proceeding, the
13 administrative law judge may direct a licensee found to have committed a violation or
violations of the licensing act to pay a sum not to exceed the reasonable costs of the
investigation and enforcement of the case.

14 (b) In the case of a disciplined licensee that is a corporation or a partnership, the
order may be made against the licensed corporate entity or licensed partnership.

15 (c) A certified copy of the actual costs, or a good faith estimate of costs where
16 actual costs are not available, signed by the entity bringing the proceeding or its
17 designated representative shall be prima facie evidence of reasonable costs of
18 investigation and prosecution of the case. The costs shall include the amount of
investigative and enforcement costs up to the date of the hearing, including, but not
limited to, charges imposed by the Attorney General.

19 (d) The administrative law judge shall make a proposed finding of the amount
20 of reasonable costs of investigation and prosecution of the case when requested
21 pursuant to subdivision (a). The finding of the administrative law judge with regard
22 to costs shall not be reviewable by the board to increase the cost award. The board
may reduce or eliminate the cost award, or remand to the administrative law judge if
the proposed decision fails to make a finding on costs requested pursuant to
subdivision (a).

23 (e) If an order for recovery of costs is made and timely payment is not made as
24 directed in the board's decision, the board may enforce the order for repayment in any
appropriate court. This right of enforcement shall be in addition to any other rights
the board may have as to any licensee to pay costs.

25 (f) In any action for recovery of costs, proof of the board's decision shall be
26 conclusive proof of the validity of the order of payment and the terms for payment.

27 (g) (1) Except as provided in paragraph (2), the board shall not renew or
28 reinstate the license of any licensee who has failed to pay all of the costs ordered
under this section.

1 (2) Notwithstanding paragraph (1), the board may, in its discretion,
2 conditionally renew or reinstate for a maximum of one year the license of any
3 licensee who demonstrates financial hardship and who enters into a formal agreement
4 with the board to reimburse the board within that one-year period for the unpaid
5 costs.

6 (h) All costs recovered under this section shall be considered a reimbursement
7 for costs incurred and shall be deposited in the fund of the board recovering the costs
8 to be available upon appropriation by the Legislature.

9 (i) Nothing in this section shall preclude a board from including the recovery of
10 the costs of investigation and enforcement of a case in any stipulated settlement.

11 (j) This section does not apply to any board if a specific statutory provision in
12 that board's licensing act provides for recovery of costs in an administrative
13 disciplinary proceeding.

14 **FIRST CAUSE FOR DISCIPLINE**

15 **(Unprofessional Conduct)**

16 18. Respondent is subject to disciplinary action under Code section 2234 in that he
17 engaged in unprofessional conduct with respect to his interaction with Ms. T.R. on December 13,
18 2022.¹ The circumstances are as follows:

19 19. On December 13, 2022, Dr. J.J. was resting on the sofa in the physician's lounge at
20 Los Angeles Downtown Medical Center. While still in the lounge, Dr. J.J. contacted Ms. T.R., a
21 medical device sales representative, who was physically present at the hospital, to meet with him
22 in the lounge. When Ms. T.R. entered the lounge, she sat down on a large, leather, mechanical
23 massage chair next to the sofa. Shortly thereafter, Respondent entered the lounge and told Ms.
24 T.R. that she was sitting in his chair. Initially, it appeared that Respondent was joking with Ms.
25 T.R. Respondent then became aggressive and yelled at Ms. T.R. that it was his lounge, and
26 nobody sits in this chair. When Ms. T.R. did not get off the chair, Respondent walked behind the
27 chair and flipped it over onto Ms. T.R. Ms. T.R. landed on the ground. The chair crushed her left
28 leg, injuring it. Ms. T.R. received treatment of her injuries at an urgent care facility. She suffered
bruising and a sprain to her left leg.

29 20. It is unprofessional conduct and conduct which breaches the rules or ethical code of
30 the medical profession for a physician to physically assault another person. Respondent's assault
31 on Ms. T.R. is unprofessional conduct.

32 ¹ For privacy purposes, the individual in this Accusation is referred to by initials.

1 **FACTUAL ALLEGATIONS IN SUPPORT OF PETITION TO REVOKE PROBATION**

2 21. Prior to the effective date of the Decision, Probation Inspector R.A. attempted
3 reaching Respondent by email, by contacting Respondent's attorney, by leaving messages with
4 Respondent's front office staff, and by leaving voicemail messages on Respondent's personal
5 cellular phone number.

6 22. On October 12, 2023, the Decision became effective.

7 23. On October 17, 2023, Probation Inspector R.A. made an unannounced visit to
8 Respondent's office in Torrance. At that time, Respondent stated that he did not receive any of
9 Probation Inspector R.A.'s messages. Probation Inspector R.A. requested that Respondent
10 schedule a date and time to discuss the Decision. Respondent refused to schedule a meeting.

11 24. On October 18, 2023, Probation Inspector R.A. emailed and overnight mailed a Non-
12 Compliance Letter to Respondent regarding Probation Condition No. 10 – Interview with the
13 Board or its Designee. Respondent was notified that he must contact Probation Inspector R.A.
14 immediately to schedule a Probation Intake Interview. Respondent did not respond.

15 25. On October 20, 2023, Probation Inspector R.A. emailed and mailed a follow-up
16 letter to Respondent notifying him of important dates set forth in the Decision as well as forms to
17 complete, and costs due to the Board since Respondent had not contacted Probation Inspector
18 R.A. for an in-person meeting to discuss the terms and conditions of probation.

19 26. On October 30, 2023, Probation Inspector R.A. emailed and overnight mailed a
20 Non-Compliance Letter to Respondent regarding Probation Condition No. 4 – Notification.
21 Respondent was notified that he must provide proof of compliance to the Board by November 10,
22 2023. Respondent did not respond.

23 27. On December 29, 2023, a Cease Practice Order was issued by the Board on the
24 grounds that Respondent has failed to obey Probation Condition No. 3 – Monitoring. Respondent
25 failed to obtain approval of a practice monitor within 60 calendar days of the effective date of the
26 Decision and was thereby prohibited from practicing medicine.

27 28. On April 19, 2024, Probation Inspector R.A. emailed and overnight mailed a Non-
28 Compliance Letter to Respondent regarding Probation Condition No. 11 – Non-Practice while on

1 Probation. Respondent was notified that he was in non-practice status from October 12, 2023 to
2 March 31, 2024. Respondent did not respond.

3 29. On June 28, 2024, Citation Order No. 800-2024-107592 was issued against
4 Respondent for violating the following conditions of probation:

- 5 a. Probation Condition No. 2 – enroll in a medical record keeping course by
6 December 12, 2023;
- 7 b. Probation Condition No. 3 – obtain an approved practice monitor by December
8 12, 2023;
- 9 c. Probation Condition No. 4 – submit a notification form to the Board from the
10 Chief of Staff or the Chief Executive Officer at every hospital where privileges or
11 membership are extended, from any other facility where engaging in the practice
12 of medicine, and from the Chief Executive officer at every insurance carrier
13 which extends malpractice insurance coverage to Respondent, by October 19,
14 2023;
- 15 d. Probation Condition No. 7 – Reimburse the Board its costs of investigation and
16 enforcement in the amount of \$13,600.00 by November 12, 2023, or receive
17 approval of a payment plan;
- 18 e. Probation Condition No. 10 – Be available in person upon request for interviews
19 either at Respondent's place of business or at the Board's Probation Unit Office.

20 Respondent did not respond to the Citation.

21 30. Respondent's Physician's and Surgeon's Certificate expired on June 30, 2024. On
22 July 1, 2024, Respondent's medical license was placed in delinquent status.

23 **FIRST CAUSE TO REVOKE PROBATION**

24 (Medical Record Keeping Course)

25 31. Respondent's probation is subject to revocation because he failed to comply with
26 Probation Condition No. 2, in that he failed to complete the required medical record keeping
27 course. The facts and circumstances regarding this violation are as follows:

28 ///

32. Paragraphs 21 through 30 are incorporated by reference and re-alleged as if fully set forth herein.

SECOND CAUSE TO REVOKE PROBATION

(Practice Monitor)

33. Respondent's probation is subject to revocation because he failed to comply with Probation Condition No. 3, in that he failed to comply with the practice monitor requirements. The facts and circumstances regarding this violation are as follows:

34. Paragraphs 21 through 30 are incorporated by reference and re-alleged as if fully set forth herein.

THIRD CAUSE TO REVOKE PROBATION

(Notification)

35. Respondent's probation is subject to revocation because he failed to comply with Probation Condition No. 4, in that he failed to submit a notification form to the Board from the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended, from any other facility where engaging in the practice of medicine, and from the Chief Executive officer at every insurance carrier which extends malpractice insurance coverage to Respondent, by October 19, 2023. The facts and circumstances regarding this violation are as follows:

36. Paragraphs 21 through 30 are incorporated by reference and re-alleged as if fully set forth herein.

FOURTH CAUSE TO REVOKE PROBATION

(Investigation/Enforcement Cost Recovery)

37. Respondent's probation is subject to revocation because he failed to comply with Probation Condition No. 7, in that he failed to reimburse the Board its costs of investigation and enforcement in the amount of \$13,600.00 by November 12, 2023, or receive approval of a payment plan. The facts and circumstances regarding this violation are as follows:

38. Paragraphs 21 through 30 are incorporated by reference and re-alleged as if fully set forth herein.

1 **FIFTH CAUSE TO REVOKE PROBATION**

2 (General Probation Requirements)

3 39. Respondent's probation is subject to revocation because he failed to comply with
4 Probation Condition No. 9, in that he failed to adhere to the general probation requirements and
5 failed to maintain a current and renewed California physician's and surgeon's certificate. The
6 facts and circumstances regarding this violation are as follows:

7 40. Paragraphs 21 through 30 are incorporated by reference and re-alleged as if fully set
8 forth herein.

9 **SIXTH CAUSE TO REVOKE PROBATION**

10 (Interview with the Board or its Designee)

11 41. Respondent's probation is subject to revocation because he failed to comply with
12 Probation Condition No. 10, in that he failed to be available in person upon request for interviews
13 either at Respondent's place of business or at the Board's Probation Unit Office. The facts and
14 circumstances regarding this violation are as follows:

15 42. Paragraphs 21 through 30 are incorporated by reference and re-alleged as if fully set
16 forth herein.

17 **SEVENTH CAUSE TO REVOKE PROBATION**

18 (Violation of Probation)

19 43. Respondent's probation is subject to revocation because he failed to comply with
20 Probation Condition No. 13, in that he failed to fully comply with the terms or conditions of his
21 probation, and it is considered a violation of probation. The facts and circumstances regarding
22 this violation are as follows:

23 44. The allegations of the First, Second, Third, Fourth, Fifth, and Sixth Causes to Revoke
24 Probation, inclusive, are incorporated herein by reference as if fully set forth.

25 **DISCIPLINE CONSIDERATIONS**

26 45. To determine the degree of discipline, if any, to be imposed on Respondent,
27 Complainant alleges that effective on or about June 3, 2016, in a prior disciplinary action titled *In*
28 *the Matter of the Accusation Against Harry Bernard Kram, M.D.* before the Medical Board of

1 California, in Case Number 17-2012-227250, Respondent's license was publicly reprimanded in
2 connection with his failure to document an informed consent for a patient's vascular surgery.
3 That decision is now final and is incorporated by reference as if fully set forth herein.

4 **PRAYER**

5 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
6 and that following the hearing, the Medical Board of California issue a decision:

7 1. Revoking the probation that was granted by the Medical Board of California in Case
8 No. 800-2020-069845 and imposing the disciplinary order that was stayed thereby revoking
9 Physician's and Surgeon's Certificate No. G 52608 issued to Respondent Harry Bernard Kram,
10 M.D.;

11 2. Revoking or suspending Physician's and Surgeon's Certificate Number G 52608,
12 issued to Respondent Harry Bernard Kram, M.D.;

13 3. Revoking, suspending or denying approval of Respondent Harry Bernard Kram,
14 M.D.'s authority to supervise physician assistants and advanced practice nurses;

15 4. Ordering Respondent Harry Bernard Kram, M.D., to pay the Board the costs of the
16 investigation and enforcement of this case, and if placed on probation, the costs of probation
17 monitoring; and

18 5. Taking such other and further action as deemed necessary and proper.

19
20 DATED: SEP 18 2025



REJI VARGHESE
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

21
22
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24 LA2025602433
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28

Exhibit A

Decision and Order

Medical Board of California Case No. 800-2020-069845

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the First Amended
Accusation Against:**

HARRY BERNARD KRAM, M.D.

**Physician's and Surgeon's
Certificate No. G 52608**

Case No.: 800-2020-069845

Respondent.

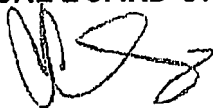
DECISION

**The attached Decision is hereby adopted as the Decision and Order of the
Medical Board of California, Department of Consumer Affairs, State of California.**

This Decision shall become effective at 5:00 p.m. on October 12, 2023.

IT IS SO ORDERED: September 12, 2023.

MEDICAL BOARD OF CALIFORNIA



**LAURIE LUBIANO, J.D., Chair
Panel A**

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 REBECCA L. SMITH
Deputy Attorney General
4 State Bar No. 179733
300 South Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 269-6475
6 Facsimile: (916) 731-2117
Attorneys for Complainant
7

8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the First Amended Accusation
Against:

13 **HARRY BERNARD KRAM, M.D.**
14 **3445 Pacific Coast Highway, #230**
15 **Torrance, CA 90505**

16 **Physician's and Surgeon's Certificate**
17 **No. G 52608,**

18 **Respondent.**

Case No. 800-2020-069845

OAH No. 2022060806

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

19 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
20 entitled proceedings that the following matters are true:

21 **PARTIES**

22 1. Reji Varghese (Complainant) is the Interim Executive Director of the Medical Board
23 of California (Board). He brought this action solely in his official capacity and is represented in
24 this matter by Rob Bonta, Attorney General of the State of California, by Rebecca L. Smith,
25 Deputy Attorney General.

26 2. Harry Bernard Kram, M.D. (Respondent) is represented in this proceeding by
27 attorneys Peter R. Osinoff and Derek F. O'Reilly-Jones, whose address is 355 South Grand
28 Avenue, Suite 1750, Los Angeles, California 90071.

3. On or about June 25, 1984, the Board issued Physician's and Surgeon's Certificate No. G 52608 to Respondent. That license was in full force and effect at all times relevant to the charges brought in First Amended Accusation No. 800-2020-069845, and will expire on June 30, 2024, unless renewed.

JURISDICTION

4. First Amended Accusation No. 800-2020-069845 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on January 25, 2022. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of First Amended Accusation No. 800-2020-069845 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in First Amended Accusation No. 800-2020-069845. Respondent has also carefully read, fully discussed with his counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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iii

1 CULPABILITY

2 9. Respondent understands and agrees that the charges and allegations in First Amended
3 Accusation No. 800-2020-069845, if proven at a hearing, constitute cause for imposing discipline
4 upon his Physician's and Surgeon's Certificate.

5 10. Respondent does not contest that, at an administrative hearing, Complainant could
6 establish a prima facie case with respect to the charges and allegations in First Amended
7 Accusation No. 800-2020-069845, a true and correct copy of which is attached hereto as Exhibit
8 A, and that he has thereby subjected his Physician's and Surgeon's Certificate, No. G 52608 to
9 disciplinary action.

10 11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
11 discipline and he agrees to be bound by the Board's probationary terms as set forth in the
12 Disciplinary Order below.

13 CONTINGENCY

14 12. This stipulation shall be subject to approval by the Medical Board of California.
15 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
16 Board of California may communicate directly with the Board regarding this stipulation and
17 settlement, without notice to or participation by Respondent or his counsel. By signing the
18 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
19 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
20 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
21 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
22 action between the parties, and the Board shall not be disqualified from further action by having
23 considered this matter.

24 13. Respondent agrees that if he ever petitions for early termination or modification of
25 probation, or if an accusation and/or petition to revoke probation is filed against him before the
26 Board, all of the charges and allegations contained in First Amended Accusation No. 800-2020-
27 069845 shall be deemed true, correct and fully admitted by Respondent for purposes of any such
28 proceeding or any other licensing proceeding involving Respondent in the State of California.

14. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

15. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or opportunity to be heard by Respondent, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 52608 issued to Respondent Harry Bernard Kram, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions:

1. EDUCATION COURSE. Within sixty (60) calendar days of the effective date of this Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee for its prior approval educational program(s) or course(s) which shall not be less than forty (40) hours per year, for each year of probation. The educational program(s) or course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified. The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure. Following the completion of each course, the Board or its designee may administer an examination to test Respondent's knowledge of the course. Respondent shall provide proof of attendance for sixty-five (65) hours of CME of which forty (40) hours were in satisfaction of this condition.

2. MEDICAL RECORD KEEPING COURSE. Within sixty (60) calendar days of the effective date of this Decision, Respondent shall enroll in a course in medical record keeping approved in advance by the Board or its designee. Respondent shall provide the approved course provider with any information and documents that the approved course provider may deem pertinent. Respondent shall participate in and successfully complete the classroom component of the course not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully complete any other component of the course within one (1) year of enrollment. The medical record keeping course shall be at Respondent's expense and shall be in addition to the

1 Continuing Medical Education (CME) requirements for renewal of licensure.

2 A medical record keeping course taken after the acts that gave rise to the charges in the
3 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
4 or its designee, be accepted towards the fulfillment of this condition if the course would have
5 been approved by the Board or its designee had the course been taken after the effective date of
6 this Decision.

7 Respondent shall submit a certification of successful completion to the Board or its
8 designee not later than fifteen (15) calendar days after successfully completing the course, or not
9 later than fifteen (15) calendar days after the effective date of the Decision, whichever is later.

10 3. MONITORING - PRACTICE. Within thirty (30) calendar days of the effective date
11 of this Decision, Respondent shall submit to the Board or its designee for prior approval as a
12 practice monitor, the name and qualifications of one or more licensed physicians and surgeons
13 whose licenses are valid and in good standing, and who are preferably American Board of
14 Medical Specialties (ABMS) certified. A monitor shall have no prior or current business or
15 personal relationship with Respondent, or other relationship that could reasonably be expected to
16 compromise the ability of the monitor to render fair and unbiased reports to the Board, including
17 but not limited to any form of bartering, shall be in Respondent's field of practice, and must agree
18 to serve as Respondent's monitor. Respondent shall pay all monitoring costs.

19 The Board or its designee shall provide the approved monitor with copies of the Decision(s)
20 and Accusation(s), and a proposed monitoring plan. Within fifteen (15) calendar days of receipt
21 of the Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a
22 signed statement that the monitor has read the Decision(s) and Accusation(s), fully understands
23 the role of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor
24 disagrees with the proposed monitoring plan, the monitor shall submit a revised monitoring plan
25 with the signed statement for approval by the Board or its designee.

26 Within sixty (60) calendar days of the effective date of this Decision, and continuing
27 throughout probation, Respondent's practice shall be monitored by the approved monitor.
28 Respondent shall make all records available for immediate inspection and copying on the

1 premises by the monitor at all times during business hours and shall retain the records for the
2 entire term of probation.

3 If Respondent fails to obtain approval of a monitor within sixty (60) calendar days of the
4 effective date of this Decision, Respondent shall receive a notification from the Board or its
5 designee to cease the practice of medicine within three (3) calendar days after being so notified.
6 Respondent shall cease the practice of medicine until a monitor is approved to provide monitoring
7 responsibility.

8 The monitor shall submit a quarterly written report to the Board or its designee which
9 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
10 are within the standards of practice of medicine, and whether Respondent is practicing medicine
11 safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure
12 that the monitor submits the quarterly written reports to the Board or its designee within ten (10)
13 calendar days after the end of the preceding quarter.

14 If the monitor resigns or is no longer available, Respondent shall, within five (5) calendar
15 days of such resignation or unavailability, submit to the Board or its designee, for prior approval,
16 the name and qualifications of a replacement monitor who will be assuming that responsibility
17 within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor
18 within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent
19 shall receive a notification from the Board or its designee to cease the practice of medicine within
20 three (3) calendar days after being so notified. Respondent shall cease the practice of medicine
21 until a replacement monitor is approved and assumes monitoring responsibility.

22 4. NOTIFICATION. Within seven (7) days of the effective date of this Decision,
23 Respondent shall provide a true copy of this Decision and First Amended Accusation to the Chief
24 of Staff or the Chief Executive Officer at every hospital where privileges or membership are
25 extended to Respondent, at any other facility where Respondent engages in the practice of
26 medicine, including all physician and locum tenens registries or other similar agencies, and to the
27 Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage
28 to Respondent. Respondent shall submit proof of compliance to the Board or its designee within

1 fifteen (15) calendar days.

2 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

3 5. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
4 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
5 advanced practice nurses.

6 6. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
7 governing the practice of medicine in California and remain in full compliance with any court
8 ordered criminal probation, payments, and other orders.

9 7. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby
10 ordered to reimburse the Board its costs of investigation and enforcement, in the amount of
11 \$13,600.00 (thirteen thousand six hundred dollars and no cents). Costs shall be payable to the
12 Medical Board of California. Failure to pay such costs shall be considered a violation of
13 probation.

14 Payment must be made in full within thirty (30) calendar days of the effective date of the
15 Order, or by a payment plan approved by the Medical Board of California. Any and all requests
16 for a payment plan shall be submitted in writing by Respondent to the Board. Failure to comply
17 with the payment plan shall be considered a violation of probation.

18 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility
19 to repay investigation and enforcement costs.

20 8. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
21 under penalty of perjury on forms provided by the Board, stating whether there has been
22 compliance with all the conditions of probation.

23 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
24 of the preceding quarter.

25 9. GENERAL PROBATION REQUIREMENTS.

26 Compliance with Probation Unit

27 Respondent shall comply with the Board's probation unit.

28 ///

1 Address Changes

2 Respondent shall, at all times, keep the Board informed of Respondent's business and
3 residence addresses, email address (if available), and telephone number. Changes of such
4 addresses shall be immediately communicated in writing to the Board or its designee. Under no
5 circumstances shall a post office box serve as an address of record, except as allowed by Business
6 and Professions Code section 2021, subdivision (b).

7 Place of Practice

8 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
9 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
10 facility.

11 License Renewal

12 Respondent shall maintain a current and renewed California physician's and surgeon's
13 license.

14 Travel or Residence Outside California

15 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
16 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
17 (30) calendar days.

18 In the event Respondent should leave the State of California to reside or to practice
19 Respondent shall notify the Board or its designee in writing thirty (30) calendar days prior to the
20 dates of departure and return.

21 10. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
22 available in person upon request for interviews either at Respondent's place of business or at the
23 probation unit office, with or without prior notice throughout the term of probation.

24 11. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
25 its designee in writing within fifteen (15) calendar days of any periods of non-practice lasting
26 more than 30 calendar days and within fifteen (15) calendar days of Respondent's return to
27 practice. Non-practice is defined as any period of time Respondent is not practicing medicine as
28 defined in Business and Professions Code sections 2051 and 2052 for at least forty (40) hours in a

1 calendar month in direct patient care, clinical activity or teaching, or other activity as approved by
2 the Board. If Respondent resides in California and is considered to be in non-practice,
3 Respondent shall comply with all terms and conditions of probation. All time spent in an
4 intensive training program which has been approved by the Board or its designee shall not be
5 considered non-practice and does not relieve Respondent from complying with all the terms and
6 conditions of probation. Practicing medicine in another state of the United States or Federal
7 jurisdiction while on probation with the medical licensing authority of that state or jurisdiction
8 shall not be considered non-practice. A Board-ordered suspension of practice shall not be
9 considered as a period of non-practice.

10 In the event Respondent's period of non-practice while on probation exceeds eighteen (18)
11 calendar months, Respondent shall successfully complete the Federation of State Medical Boards'
12 Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment
13 program that meets the criteria of Condition 18 of the current version of the Board's "Manual of
14 Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of
15 medicine.

16 Respondent's period of non-practice while on probation shall not exceed two (2) years.

17 Periods of non-practice will not apply to the reduction of the probationary term.

18 Periods of non-practice for a Respondent residing outside of California will relieve
19 Respondent of the responsibility to comply with the probationary terms and conditions with the
20 exception of this condition and the following terms and conditions of probation: Obey All Laws;
21 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
22 Controlled Substances; and Biological Fluid Testing.

23 12. COMPLETION OF PROBATION. Respondent shall comply with all financial
24 obligations (e.g., restitution, probation costs) not later than one hundred twenty (120) calendar
25 days prior to the completion of probation. This term does not include cost recovery, which is due
26 within thirty (30) calendar days of the effective date of the Order, or by a payment plan approved
27 by the Medical Board and timely satisfied. Upon successful completion of probation,
28 Respondent's certificate shall be fully restored.

1 13. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
2 of probation is a violation of probation. If Respondent violates probation in any respect, the
3 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
4 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke
5 Probation, or an Interim Suspension Order is filed against Respondent during probation, the
6 Board shall have continuing jurisdiction until the matter is final, and the period of probation shall
7 be extended until the matter is final.

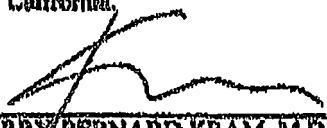
8 14. LICENSE SURRENDER. Following the effective date of this Decision, if
9 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
10 the terms and conditions of probation, Respondent may request to surrender his or her license.
11 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
12 determining whether or not to grant the request, or to take any other action deemed appropriate
13 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
14 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
15 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
16 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
17 application shall be treated as a petition for reinstatement of a revoked certificate.

18 15. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
19 with probation monitoring each and every year of probation, as designated by the Board, which
20 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
21 California and delivered to the Board or its designee no later than January 31 of each calendar
22 year.

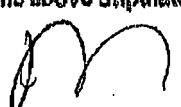
23 16. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
24 a new license or certification, or petition for reinstatement of a license, by any other health care
25 licensing action agency in the State of California, all of the charges and allegations contained in
26 First Amended Accusation No. 800-2020-069845 shall be deemed to be true, correct, and
27 admitted by Respondent for the purpose of any Statement of Issues or any other proceeding
28 seeking to deny or restrict license.

ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Peter R. Osinoff. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 5/01/2023

 HARRY BERNARD KRAM, M.D.
 Respondent

I have read and fully discussed with Respondent Harry Bernard Kram, M.D., the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

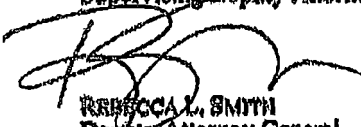
DATED: 5/1/2023

 DEREK P. O'REILLY-JONES
 PETER R. OSINOFF
 Attorneys for Respondent
ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

DATED: May 1, 2023

Respectfully submitted,

 ROB BONTA
 Attorney General of California
 JUDITH T. ALVARADO
 Supervising Deputy Attorney General


 REBECCA L. SMITH
 Deputy Attorney General
 Attorneys for Complainant

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Exhibit A

First Amended Accusation No. 800-2020-069845

1 ROB BONTA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 REBECCA L. SMITH
Deputy Attorney General
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Attorneys for Complainant

7
8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the First Amended Accusation
13 Against:

14 **HARRY BERNARD KRAM, M.D.**
15 **3445 Pacific Coast Highway, # 230**
16 **Torrance, CA 90505**

17 **Physician's and Surgeon's Certificate**
18 **No. G 52608,**

19 **Respondent.**

Case No. 800-2020-069845

20 **FIRST AMENDED**
21 **ACCUSATION**

22 **PARTIES**

23 1. William Prasifka (Complainant) brings this First Amended Accusation solely in his
24 official capacity as the Executive Director of the Medical Board of California, Department of
25 Consumer Affairs (Board).

26 2. On or about June 25, 1984, the Board issued Physician's and Surgeon's Certificate
27 Number G 52608 to Harry Bernard Kram, M.D. (Respondent). The Physician's and Surgeon's
28 Certificate was in full force and effect at all times relevant to the charges brought herein and will
expire on June 30, 2022, unless renewed.

JURISDICTION

3. This First Amended Accusation is brought before the Board, under the authority of
the following laws. All section references are to the Business and Professions Code (Code)
unless otherwise indicated.

COST RECOVERY

7. Section 125.3 of the Code states:

(a) Except as otherwise provided by law, in any order issued in resolution of a disciplinary proceeding before any board within the department or before the Osteopathic Medical Board, upon request of the entity bringing the proceeding, the administrative law judge may direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

(b) In the case of a disciplined licensee that is a corporation or a partnership, the order may be made against the licensed corporate entity or licensed partnership.

(c) A certified copy of the actual costs, or a good faith estimate of costs where actual costs are not available, signed by the entity bringing the proceeding or its designated representative shall be prima facie evidence of reasonable costs of investigation and prosecution of the case. The costs shall include the amount of investigative and enforcement costs up to the date of the hearing, including, but not limited to, charges imposed by the Attorney General.

(d) The administrative law judge shall make a proposed finding of the amount of reasonable costs of investigation and prosecution of the case when requested pursuant to subdivision (a). The finding of the administrative law judge with regard to costs shall not be reviewable by the board to increase the cost award. The board may reduce or eliminate the cost award, or remand to the administrative law judge if the proposed decision fails to make a finding on costs requested pursuant to subdivision (a).

(e) If an order for recovery of costs is made and timely payment is not made as directed in the board's decision, the board may enforce the order for repayment in any appropriate court. This right of enforcement shall be in addition to any other rights the board may have as to any licensee to pay costs.

(f) In any action for recovery of costs, proof of the board's decision shall be conclusive proof of the validity of the order of payment and the terms for payment.

(g) (1) Except as provided in paragraph (2), the board shall not renew or reinstate the license of any licensee who has failed to pay all of the costs ordered under this section.

(2) Notwithstanding paragraph (1), the board may, in its discretion, conditionally renew or reinstate for a maximum of one year the license of any licensee who demonstrates financial hardship and who enters into a formal agreement with the board to reimburse the board within that one-year period for the unpaid costs.

(h) All costs recovered under this section shall be considered a reimbursement for costs incurred and shall be deposited in the fund of the board recovering the costs to be available upon appropriation by the Legislature.

(i) Nothing in this section shall preclude a board from including the recovery of the costs of investigation and enforcement of a case in any stipulated settlement.

(j) This section does not apply to any board if a specific statutory provision in

1 that board's licensing act provides for recovery of costs in an administrative
2 disciplinary proceeding.

3 FACTUAL ALLEGATIONS

4 Patient 1:¹

5 8. In June of 2018, Patient 1, a 36-year-old woman was referred for evaluation of a
6 newly found mole on her back, by her general practitioner to a dermatologist, who completed an
7 excisional biopsy of the mole. The pathology report described the excised mass as measuring 0.6
8 x 0.4 x 0.1 cm and consistent with basal cell carcinoma, infundibulocystic type, with the lesion
9 extending to the inked dep edge (base) of the specimen. As a result of these findings, the
10 dermatologist referred Patient 1 to a surgeon for evaluation.

11 9. On March 18, 2019, Respondent performed an initial evaluation of Patient 1. He
12 recommended surgical excision of the basal cell carcinoma on her back with the purpose of
13 removing any residual cancer that might exist. Respondent saw Patient 1 one more time prior to
14 surgery, and explained to her that the surgery would be minor and scheduled the surgery.

15 10. On April 12, 2019, Respondent performed a surgical radical excision of the site with
16 bilateral subcutaneous advancement flaps and a complex wound closure. In his operative note,
17 Respondent stated that a "large elliptical incision was drawn around the previously biopsied basal
18 cell carcinoma with at least 2 cm margins circumferentially." He closed the wound in layers and
19 he used a row of 2-0 nylon sutures to close the skin. The size of the specimen removed was
20 described as measuring 5.2 cm from medial to lateral, 3 cm from superior-inferior, and 1.2 cm in
21 thickness. The area where the previous mole had been was reported as 0.5 x 0.4 cm. Finally, the
22 lesion measured 0.7 cm from the nearest margin which is the inferior edge as marked by
23 Respondent.

24 11. On April 15, 2019, Patient 1 saw her wound for the first time after surgery when her
25 husband removed the bandage. She was surprised by the size of her incision.

26 12. On April 30, 2019 (18 days after the operation), at her first post-operative
27 appointment with Respondent, Patient 1 expressed her dismay to him. She stated that she would

28 ¹ The patient's identity is known to Respondent. Numbers used in lieu of the patient names in
order to address privacy concerns.

1 have declined the procedure had Respondent adequately described his proposed plan prior to the
2 procedure. Pathology was reviewed and she was told to return in 4-6 weeks. However, her
3 sutures were kept in place.

4 13. On May 28, 2019 (approximately seven weeks after her surgery), Patient 1's sutures
5 were removed.

6 Patient 2:

7 14. On December 4, 2017, Respondent treated Patient 2, a 63-year-old woman at St.
8 Vincent's Medical Center by performing vascular surgery on her, including the placement of
9 venous stents. After the surgery, Patient 2 complained about right leg numbness and an inability
10 to walk. Thereafter, a stent was located in Patient 2's spinal canal. On December 9, 2017, the
11 venous stents were removed, but the patient continued to suffer from long-term complications of
12 pain and weakness in the right lower extremity. She described numbness and burning in her right
13 leg and foot. She underwent physical therapy and suffered prolonged hospitalizations.
14 Eventually she was discharged home on February 1, 2018. Thereafter, over the next two years,
15 Patient 2 continued to see a neurologist and two neurosurgeons for her continued right leg
16 weakness/numbness and ongoing inability to walk. She has numbness in the left knee and leg,
17 but can move the left leg without pain. The patient requires a walker to ambulate and at times
18 uses a wheelchair.

19 15. By way of background, Patient 2's past medical history included elevated Factor VIII,
20 stage IIB endometrial adenocarcinoma status post-total abdominal hysterectomy with bilateral
21 salpingo-oophorectomy in 2012, gastritis, hiatal hernia, schizophrenia, and varicose veins and
22 lymphedema in her lower extremities with prior episodes of deep vein thrombosis (DVT). In
23 November of 2017, Patient 2 suffered from left lower extremity edema and left malleolus
24 ulceration. The wound was been treated with Clindamycin following an Emergency Room visit
25 and was found to have no recurrent acute DVT.

26 16. In October of 2017, Respondent first saw Patient 2 at his Torrance, California office.
27 Respondent recommended that she undergo a procedure to surgically (angioplasty) implant stents
28 in her legs, which would heal her wound. He failed to adequately assess the patient and explain

1 the possible risks or complications of the procedure. Respondent also ordered an ultrasound of
2 her legs.

3 17. On December 4, 2017, Respondent performed an elective vascular surgery on Patient
4 2; she underwent a venogram of the left lower extremity and "left iliac vein angioplasty and
5 stenting (16 x 90, 14 x 40, and 16 x 60 mm)." Patient 2's written physician instructions directed
6 that she be discharged on post-operative day one "once stable." The hospital nursing staff charted
7 that there were direct orders to send the patient home.

8 18. On December 5, 2017, when a nurse assessed Patient 2 in the morning, the patient
9 complained of weakness and an inability to walk. The nursing staff at the hospital made more
10 than three unsuccessful attempts to reach Respondent in the morning. Eventually, when a nurse
11 spoke to Respondent, he told her to call Dr. B. Upon contacting Dr. B., Dr. B. told the nurse that
12 Dr. B did not know anything about the patient. Thereafter, the nurse attempted to call another
13 physician, Dr. L., without success. Patient 2 also called Respondent's office about her complaints
14 that her right leg felt numb and that she could not feel her extremity. Respondent eventually saw
15 Patient 2 around 20:30 hours and ordered an arterial and venous duplex ultrasound. The patient
16 was admitted to the hospital and provided with pain medications.

17 19. On December 6, 2017, Patient 2 underwent a venous duplex ultrasound of the right
18 lower extremity which did not reveal any deep venous thrombosis. A right lower extremity
19 arterial duplex ultrasound revealed calcified arteries in the right lower extremity.

20 20. On December 8, 2017, Patient 2 underwent a computerized tomography (CT) scan
21 which revealed a "venous stent in the left external iliac artery extending cephalad, entering the
22 spinal canal through the left anterior foramen at the S1 level and extending into the spinal canal
23 mostly on the right side, extending as high as mid L3 body."

24 21. On December 9, 2017, Patient 2 underwent an ultrasound guided procedure which
25 removed her three iliac vein stents via the left common femoral vein and included a venogram of
26 the patient's inferior vena cava and left lower extremity.

27 22. On December 12, 2017, a neurologist assessed Patient 2's right lower extremity
28 weakness as well as her pain in the distribution of the femoral nerve or upper lumbar root area.

1 His differential diagnosis included upper lumbar radiculopathy versus the possibility of femoral
2 nerve compression.

3 23. On December 14, 2017, Patient 2 underwent a magnetic resonance imaging (MRI)
4 which revealed a "large collection consistent with a hematoma along the left pelvic sidewall as
5 described [and that] post-procedural changes seen along the left S1 root an epidural vein as noted
6 [and that the] left common iliac vein is poorly or nonopacified." Patient 2 underwent physical
7 therapy and saw a neurologist during this hospitalization. Respondent also wrote brief notes
8 stating that she was getting stronger.

9 24. On December 17, 2017, Patient 2 underwent another MRI which revealed the
10 following: "The intraspinal structure extending from S1-L3 with increased signal intensities as
11 noted is identified. Etiology is uncertain but most likely candidate is a hematoma, possibly
12 intravenous thrombus." Thereafter, she was hospitalized, and transferred to the acute rehab unit
13 of St. Vincent's Medical Center on December 21, 2017. Thereafter, the patient continued to
14 receive medical treatment to address her complications after her surgery by Respondent.

15 FIRST CAUSE FOR DISCIPLINE

16 (Gross Negligence in the Care and Treatment of Patient 2)

17 25. Respondent is subject to disciplinary action under section 2234, subdivision (b), in
18 that he committed gross negligence in the care and treatment of Patient 2. Complainant refers to
19 and, by this reference incorporates herein, paragraphs 14 through 24, above, as though fully set
20 forth therein. The circumstances are as follows:

21 26. On or about December 4, 2017 and thereafter, Respondent committed gross
22 negligence in connection with his care and treatment of Patient 2 when he failed to timely
23 recognize and diagnose the incorrectly deployed stent in Patient 2's spinal column. Respondent
24 delayed in treating Patient 2's post-operative complications (the patient's inability to walk and
25 right leg numbness on post-operative day one). An inability to walk and right leg numbness are
26 unusual complications following a venogram and iliac stenting. The standard of care promptly
27 obtaining imaging studies if a diagnosis could not be otherwise confirmed. The CT of the
28 patient's abdomen and pelvis, which revealed the mis-deployed stent in the spinal canal, did not

1 occur until four days after the procedure. Had Respondent promptly addressed the patient's
2 complications, the risk of nerve damage and subsequent hematoma in the spinal canal could have
3 possibly been avoided or reduced.

4 **SECOND CAUSE FOR DISCIPLINE**

5 **(Repeated Negligent Acts and/or Incompetence in**
6 **the Care and Treatment of Patients 1 and 2)**

7 27. Respondent is subject to disciplinary action under section 2234, subdivisions (c) and
8 (d), in that he committed repeated negligent acts and/or incompetence in the care and treatment of
9 Patients 1 and 2. Complainant refers to and, by this reference incorporates herein, paragraphs 8
10 through 26, above, as though fully set forth therein. The circumstances are as follows:

11 **Patient 1.**

12 28. On or about April 12, 2019 and thereafter, Respondent committed the following
13 repeated negligent acts and/or incompetence in connection with his care and treatment of
14 Patient 1:

15 (a) Respondent failed to obtain an adequate informed consent from Patient 1
16 regarding her surgery, including, in respect to the size of the incision, the risks, benefits, or
17 alternatives to surgery, and/or failed to adequately document such informed consent.

18 (b) Respondent's failed to adequately perform surgery on Patient 1, including as
19 exhibited by his surgical technique for the excision of the basal cell carcinoma from Patient 1.
20 The size of the excision Respondent performed on Patient 1 is beyond the extent of the margins
21 required by the standard of care for treatment of the basal cell carcinoma.

22 (c) Respondent failed to adequately manage and/or care for Patient 1's wound from
23 the surgery. He failed to remove the sutures used to close this type of wound in Patient 1 in a
24 timely fashion to prevent undue scarring and favorable cosmetic results.

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26 ///

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28 ///

1 Patient 2.

2 29. On or about December 4, 2014 and thereafter, Respondent committed the following
3 repeated negligent acts and/or incompetence in connection with his care and treatment of
4 Patient 2:

5 (a) Respondent failed to adequately assess Patient 2 and address her condition
6 and/or failed to accurately and/or adequately document his care and treatment for Patient 2. The
7 standard of care requires legible documentation setting forth significant medical conditions,
8 working diagnoses, physical examination, and treatment plans. Respondent's medical record
9 keeping during Patient 2's hospitalization at St. Vincent's Medical Center is almost illegible. In
10 addition, Respondent's record keeping after he saw her post-operatively failed to adequately
11 describe his assessment of her condition and his treatment plan, other than ordering studies,
12 which were performed over the next several days.

13 (b) Respondent failed to adequately respond to nursing and medical staff at the
14 hospital where Patient 2 was recovering after he performed surgery on her, and address
15 Patient 2's post-operative complication (including when the patient expressed unusual sensations
16 following the surgery). The standard of care requires that the patient's physician, or another
17 designated physician, be available to respond to nurses caring for the patient. Nursing staff at the
18 hospital could not reach Respondent nearly 11 hours after Respondent performed surgery on the
19 patient (and could not obtain updated orders to address Patient 2's post-operative complications).

20 (c) Respondent committed negligence and/or incompetence by exhibiting a poor
21 understanding of venous anatomy and stenting of veins that were not iliac veins. At the time
22 Respondent performed a venogram on Patient 2 on December 4, 2017, he failed to ensure that he
23 was in the iliac vein and he failed to ensure that the vein was opened enough to accommodate a
24 stent, with the understanding that a stent in an occluded vein would not remain open. Respondent
25 failed to confirm the patency of the stents, either intraoperatively or post-operatively.

26 ///

27 ///

28 ///

1 **THIRD CAUSE FOR DISCIPLINE**

2 (Failure to Maintain Adequate and Accurate Medical Records for Patients 1 and 2)

3 30. Respondent is subject to disciplinary action under Code section 2266, in that he failed
4 to maintain adequate and accurate records related to the provision of medical services to Patients
5 1 and 2. The circumstances are as follows:

6 31. The allegations of the First and Second Causes for Discipline are incorporated herein
7 by reference as if fully set forth.

8 **FOURTH CAUSE FOR DISCIPLINE**

9 (General Unprofessional Conduct as to Patients 1 and 2)

10 32. Respondent is subject to disciplinary action under Code section 2234, in that his
11 actions and/or omissions represent unprofessional conduct, generally. The circumstances are as
12 follows:

13 33. The allegations of the First, Second and Third Causes for Discipline, inclusive, are
14 incorporated herein by reference as if fully set forth.

15 **DISCIPLINARY CONSIDERATIONS**

16 34. To determine the degree of discipline, if any, to be imposed on Respondent,
17 Complainant alleges that effective on or about June 3, 2016, in a prior disciplinary action titled *In*
18 *the Matter of the Accusation Against Harry Bernard Kram, M.D.* before the Medical Board of
19 California, in Case Number 17-2012-227250, Respondent's license was publicly reprovved in
20 connection with his failure to document an informed consent for a patient's vascular surgery.
21 That decision is now final and is incorporated by reference as if fully set forth herein.

22 **PRAYER**

23 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
24 and that following the hearing, the Medical Board of California issue a decision:

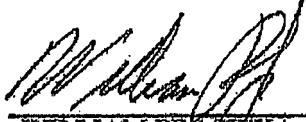
25 1. Revoking or suspending Physician's and Surgeon's Certificate Number G 52608,
26 issued to Respondent Harry Bernard Kram, M.D.;

27 2. Revoking, suspending or denying approval of Respondent Harry Bernard Kram,
28 M.D.'s authority to supervise physician assistants and advanced practice nurses;

1 3. Ordering Respondent Harry Bernard Kram, M.D., to pay the Board the costs of the
2 investigation and enforcement of this case, and if placed on probation, the costs of probation
3 monitoring; and

4 4. Taking such other and further action as deemed necessary and proper.

5
6 DATED: JUN 09 2022



WILLIAM PRASIFKA
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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